

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>fp</i>	859	07-27-01
RESPONSE FORMALITY REVIEW	<i>T2</i>	947	03/13/02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	Original
1	1/25/02
2	
3	
4	
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7	
8	
9	
10	
11	
12	X
13	X
14	—
15	—
16	✓
17	✓
18	✓
19	✓
20	✓
21	X
22	✓
23	✓
24	X
25	X
26	X
27	X
28	X
29	X
30	X
31	✓
32	✓
33	✓
34	✓
35	✓
36	✓
37	✓
38	✓
39	✓
40	X
41	X
42	X
43	X
44	X
45	X
46	X
47	X
48	✓
49	✓
50	✓

Claim	Date
Final	Original
51	1/25/02
52	✓
53	✓
54	✓
55	✓
56	—
57	✓
58	✓
59	✓
60	✓
61	✓
62	✓
63	✓
64	✓
65	✓
66	✓
67	✓
68	✓
69	✓
70	✓
71	—
72	—
73	✓
74	✓
75	✓
76	✓
77	—
78	—
79	✓
80	✓
81	X
82	✓
83	✓
84	✓
85	✓
86	✓
87	✓
88	X
89	✓
90	✓
91	✓
92	✓
93	✓
94	X
95	✓
96	✓
97	✓
98	✓
99	✓
100	✓

Claim	Date
Final	Original
101	1/25/02
102	
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5C-571
03/13/02

If more than 150 claims or 10 actions
staple additional sheet here